



For Ecology Use

Fee Paid 30.

State of Washington ARTIMENT OF ECOLOGY Application for a Water Right Please follow the attached instructions to avoid unnecessary delays.

me_Cit	y of Whit	e Salmon	, Ira A.	Martin	Home Tel:(
ailing Add	lress POB	2139	CITY E	ngineer	Work Tel:(509)4	93	1133
				Lip+4 9867	<u>'2</u> +FAX:	(509)	493 -	1231
	2. CONT				L ABOUT THE			
me					Home Tel:()_		
iling Add	lress				Work Tel:(V
/		St	ateZ	Zip+4	+FAX:			
ationship	to applicant							
4 4 450	3. STAT	EMENT	OF INT	CENT e than		(X	gallons	s per minute or
mate a n		•			per year: 1600		C 4: 4	1-44
Checker of the control of the contro	ck if the wat led: From 4. WAT	er use is pro	oposed for to RCE	a short-term	project. Indicate the	period o		
Checkection SURFA ame the ske, etc.	From 4. WATE ACE WATE water source If unnamed, stream," etc	ER SOU	oposed for to RCE	a short-term	project. Indicate the	period o		
Checketion (SURFA) SURFA ame the ske, etc. nnamed	ck if the wat led: From 4. WAT CE WATE water source If unnamed,	ER SOU	to to RCE te if stream amed sprin	a short-term	project. Indicate the	ER for up	to 3	well(s). ls anticipated, with final
ection SURFA ame the ke, etc. annamed umber of	ck if the wat led: From 4. WAT ACE WATE water source If unnamed, stream," etc diversions: ws into (name	ER SOU	to to RCE te if stream amed sprin	a short-term	If GROUNDWAT A permit is desired to be 8 inch -	ER for up	to 3	well(s). ls anticipated, with final
Checketion SURFA ame the ske, etc. Innamed OCATIO Inter the earest se Species	ck if the wat led: From 4. WAT ACE WATE water source If unnamed, stream," etc diversions: ws into (name) north-south ction corne ific pref	ER SOU	to to RCE te if stream amed spring of water):	a short-term / / , spring, g,"	If GROUNDWAT A permit is desired to be 8 inch -	ER for up (s): tes 800' be det	to 3 st well depth, ermine	well(s). ls anticipated, with final ed.
SURFA ame the ke, etc. umber of ource flow	ck if the wat led: From 4. WAT ACE WATE water source If unnamed, stream," etc diversions: ws into (name) north-south ction corne ific pref	ER SOU	to to RCE te if stream amed spring of water):	a short-term / / , spring, g," nces in feet the shown of thin below	If GROUNDWAT A permit is desired to be 8 inch - well sizes to 1 from the point of diagram of the subdivision.	ER for up	to 3 st well depth, cerminal	well(s). ls anticipated, with final ed.
Checker of the content of the conten	ck if the wat led: From	ER SOU	to to RCE te if stream amed spring of water): west distant ll site amount in the stream west distant ll site amount in the stream west distant	a short-term / / , spring, g,"	If GROUNDWAT A permit is desired to be 8 inch - well sizes to 1 from the point of diagram of the subdivision.	ER for up	to 3 st well depth, cerminal	well(s). Is anticipated, with final ed. Addrawal to the consumer is platted, completed below:
Checker of the content of the conten	ck if the wat led: From	ER SOU	to to RCE te if stream amed spring of water): west distant ll site amount in the stream west distant ll site amount in the stream west distant	a short-term / / , spring, g," nces in feet the shown of thin below	If GROUNDWAT A permit is desired to be 8 inch - well sizes to 1 from the point of diagram of the subdivision.	ER for up (s): tes 800' be det version withi	to 3 st weldepth, ermine or with	well(s). ls anticipated, with final ed. hdrawal to the ow subdivision ource is platted, complet below:

ECY 040-1-14 Rev. 9/95 F

APPLICATION

WEATS 022405

Section 5. GENERAL WATER SYSTEM INFORMATION Name of system, if named: City of White Salmon / Multijurisdictional Water System R Briefly describe your proposed water system. (See instructions.) Improvements and proposed service generally as described in the 1996 Multijurisdictional Water System Plan for the Cities of White Salmon and Bingen, and the Port of Klickitat. Do you already have any water rights or claims associated with this property or system? X YES \(\square\) NO PROVIDE DOCUMENTATION. Rights we are aware of for White Salmon: Certificate Nos. 3474, 7109, and 10252 which are in Department of Ecology records. Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.) For the 20-25 year service needs of the multi-jurisdictional area. Number of "connections" requested: see above Type of connection A. municipal (Homes, Apartment, Recreational, etc.) ▼ YES □ NO Are you within the area of an approved water system? B If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department. This is for the regional water system. Complete C. and D. only if the proposed water system will have fifteen or more connections. Do you have a current water system plan approved by the Washington State Department of Health? YES NO If yes, when was it approved? 10/25/96 Please attach the current approved version of your plan. YES NO D. Do you have an approved conservation plan? If yes, when was it approved? 11/96 Please attach the current approved version of your plan.

A.	Total number of acres t	to be irrigated:		
B.	List total number of acr	res for other specified agricultural uses:		
	Use	Acres		
	Use	Acres		
	Use	Acres		
C.		to be covered by this application:		
C. D.	Family Farm Act (Initial Add up the acreage in value acreage irrigated than the Acreage property of the Acreage property).	ative Measure Number 59, November 3, 1977) which you have a controlling interest, including only: ated under water rights acquired after December 8, 1977; osed to be irrigated under this application; osed to be irrigated under other pending application(s).		
	Family Farm Act (Initial Add up the acreage in variation # Acreage property Acreage property # Acreage # Acreage property # Acreage property # Acreage property # Acreage # Acreag	ative Measure Number 59, November 3, 1977) which you have a controlling interest, including only: ated under water rights acquired after December 8, 1977; osed to be irrigated under this application;	YES	NO

Non-milking

Dairy - # Milking

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

An above ground reservoir is planned - 100,000 gallons

R YES - NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

From White Salmon proceed north on SR 141 to Powerhouse Road. Turn onto Powerhouse Road and continue 1/4 mile. Preferred site is south of road approximately 400 yards, near ridge.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Sect	ion 11. PROPERTY OWNERSHIP		
۸.	Does the applicant own the land on which the water will be If no, explain the applicant's interest in the place of use and owner(s):		10
	Municipal water purveyor.		
В.	Does the applicant own the land on which the water source If no, submit a copy of agreement: A preliminary agreement has been made with will be made and provided prior to well co	th the landowner. The final agreeme	
order and m	fy that the information above is true and accurate to the to process my application, I grant staff from the Department on the original purposes. Even though I may have been assisted apployees of the Department of Ecology, all responsibility for the original purposes.	ment of Ecology access to the site for inspection ted in the preparation of the above application	
	Vin D	4/23/97	
	ant (or authorized representative) A. Martin for City of White Salmon	Date (
	-		
Lando	n/a wner for place of use (if same as applicant, write "same")	Date	

Use this page to continue your answers to any questions on the application. Pl number before answer.	lease indicate section
	6
SECTION 3. Description of the Place of Use	
The area served by the City of White Salmon / Multijurisdictional Water System as described in the most recent water system plan approved by the Washington Department of Health.	¥

SECTION 7. Irrigation/Agricultural...Information

The municipal use applied for includes irrigation, including some agricultural irrigation accounts.

Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:		
Please provide the additional information requeste	ed above and return your (date).	application by
cology staff	Date	

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).